

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L11000070455

Entity Name: EDWARD J. WELCH LLC

**FILED**  
**Oct 28, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

18249 SYCAMORE RD.  
FORT MYERS, FL 33967

**New Principal Place of Business:**

**Current Mailing Address:**

18249 SYCAMORE RD.  
FORT MYERS, FL 33967

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

WELCH, EDWARD J  
18249 SYCAMORE RD.  
FORT MYERS, FL 33967 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: EDWARD J WELCH

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: WELCH, EDWARD J  
Address: 18249 SYCAMORE RD.  
City-St-Zip: FORT MYERS, FL 33967

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: EDWARD J WELCH

MGR

10/28/2014

Electronic Signature of Authorized Person

Date